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APPLICATION NO.	FILING DATE		FIRST NAMED INVENTO		ATTORNEY DOCKE	T NO.	CONFIRMATION NO	5.	
10/736,308			Craig Hopper		200312849-1		5481		
TITLE OF INVENTION: (	ouplexer having	AN AUXILIARY ROLI	LEK THAT EXHIBITS S	LIPPAGE					
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV, PAID ISSUE	FEE TOTAL FEE	(5) DUE	DATP DUE		
nonprovisional	NO	\$1400	\$300	\$0	\$170	)0	04/16/2007		
EXAMIN	ER	ART UNIT	CLASS-SUBCLASS	]					
MORRISON, T.	A ZAMOH	3653	271-272000						
t. Change of correspondent CFR 1.363).  Change of correspon Address form PTO/SB/1  "Fee Address" indice PTO/SB/47; Rev 03-02 Number is required.	dence address (or Cha 22) attached, uion (or "Fee Address"	age of Correspondence	2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered attorneys or agents. If no name is listed, no name will be printed.						
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